## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

**Application or Docket Number** 

10007137-1

CLAIMS AS FILED - PART I (Column 1)						(Column 2)		SMALL ENTITY TYPE		OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			25					RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS 2			25 mini	2 5 minus 20=		• 5		X\$ 9=		OR	X\$18=	90
INDEPENDENT CLAIMS 3 minus 3 =							X40=			X80=		
MULTIPLE DEPENDENT CLAIM PRESENT										OR		
* If the difference in column 1 is less than zero, enter					r "O" in c	olumn 2		+135=		OR	+270=	<u>a</u>
						oldiiii 2		TOTAL		OR	TOTAL	800
CLAIMS AS AMENDED - PA (Column 1) (Column 1)					HIII lumn 2) (Column 3)			SMALL ENTITY			OTHER SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=	•	OR	X\$18=	
	Independent	•	Minus	***		=		X40=		OR	X80=	
	FIRST PRESE	NTATION OF MI	ULTIPLE DEP	ENDEN	T CLAIM		֡֡֞֞֜֞֜֞֜֞֜֞֜֜֜֜֜֜֜֜֜֜֜֞֜֜֜֜֡֡֡֡֡֡֡֓֜֜֜֜֡֡֡֡֡֡֡֓֡	+135=		OR	+270=	
							ļ	TOTAL			TOTAL	
	(Column 1) (Column 2) (Column 3)							ADDIT. FEE	-	On	ADDIT. FEE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT	4	HIGI NUN PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	* NTATION OF M	Minus	***	T CLAIM	=		X40=		OR	X80=	
<u> </u>	FINST FRESE	NIATION OF M	OLTIFICE DEF	ENDEN	CLAIN		ل	+135=		OR	+270=	
							į	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
	,	(Column 1)			ımn 2)	(Column 3)						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUN PREV	HEST MBER IOUSLY ) FOR	PRESENT EXTRA		RATÉ	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	7
	Independent	*	Minus	***		=		X40=	· · · · · · · · · · · · · · · · · · ·	OR	X80=	
L	FIRST PRESE	NTATION OF M	IULTIPLE DEF	PENDEN	IT CLAIM			+135=		OR	+270=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
		nber Previously Pa						und in the ap	propriate bo	x in co	olumn 1.	